ISSUE SLIP STAPLE AREA (for additional cross references) **POSITION** ID NO. INITIALS DATE **FEE DETERMINATION** O.I.P.E. CLASSIFIER **FORMALITY REVIEW** RESPONSE FORMALITY REVIEW Best Available Copy INDEX OF CLAIMS . Rejected Non-elected Interference - (Through numeral)... Canceled Restricted Objected Date Ctaim Date Final Original Final ī 45 .. If more than 150 claims or 10 action BEST AVAILABLE staple additional sheet here

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